

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

ALLEN SUPPLY
27220006-1
1. MONTH OF JUNE 1, 2008 THRU JUNE 30, 2008

- | | | | | |
|-----|--|------------------------------------|------------------------------------|--------------------------------------|
| 2. | Is Outlet # (8 digit) Correct? | <input checked="" type="radio"/> Y | N | N/A |
| 3. | Is average Total flow-gal.day stated in space provided? | <input checked="" type="radio"/> Y | N | N/A |
| 4. | Is max. Total flow-gal day stated in space provided? | <input checked="" type="radio"/> Y | N | N/A |
| 5. | Is method used to calculate water stated? | <input checked="" type="radio"/> Y | N | N/A |
| 6. | Are number of working days stated? | <input checked="" type="radio"/> Y | N | N/A |
| 7. | Are there any parameters which have exceeded PVSC Local Limits? | Y | <input checked="" type="radio"/> N | N/A |
| 8. | Is proper compliance/non-compliance statement provided? | <input checked="" type="radio"/> Y | N | N/A |
| 9. | Have correct number of samples been submitted? | <input checked="" type="radio"/> Y | N | N/A |
| 10. | Has PHC result been listed on MR-1 report? | Y | N | <input checked="" type="radio"/> N/A |
| 11. | Has sample number been reported in space provided? | <input checked="" type="radio"/> Y | N | N/A |
| 12. | Have all regulated parameters been listed on MR-1? | <input checked="" type="radio"/> Y | N | N/A |
| 13. | Has sample type been stated on MR-1? | <input checked="" type="radio"/> Y | N | N/A |
| 14. | Have all samples been taken during this reporting period? | <input checked="" type="radio"/> Y | N | N/A |
| 15. | Has NJDEPE certified lab been used? | <input checked="" type="radio"/> Y | N | N/A |
| 16. | Have analytical results been submitted on copies of Laboratory stationery? | <input checked="" type="radio"/> Y | N | N/A |
| 17. | Have results been written in space designated on MR-1? | <input checked="" type="radio"/> Y | N | N/A |
| 18. | Is correct method used to preserve samples stated on MR-1? | <input checked="" type="radio"/> Y | N | N/A |
| 19. | Has MR-1 been signed by authorized representative? | <input checked="" type="radio"/> Y | N | N/A |
| 20. | Has information been submitted on proper MR-1 form? | <input checked="" type="radio"/> Y | N | N/A |
| 21. | Remove Arsenic from report if sampling not required | Y | N | <input checked="" type="radio"/> N/A |

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

ALLEN SUPPLY

27220006

First Reviewer: comments on deficiencies completeDate Reviewed 8/13/08 Date sent to user _____Date due back _____ Reviewer c.j.m.

Second review comments on deficiencies

Date Reviewed _____ Date sent to user _____

Date due back _____ Reviewer _____

Date _____ Reviewer _____

CAVIN

PRETREATMENT MONITORING REPORT

NAME: Allen Linen Supply and Laundry Service IncMAILING ADDRESS: 407 20th Ave Paterson N.J. 07513FACILITY LOCATION: 971 E 24th Street Paterson N.J. 07513CATEGORY & SUBPART: 9999OUTLET #: 1CONTACT OFFICIAL: Juan GalarzaTELEPHONE: 973-742-6131NEW CUSTOMER ID / OUTLET ID: 27220006

OLD OUTLET DESIGNATION: _____



MONITORING PERIOD					
Start			End		
06	01	08	06	30	08
MO	DAY	YR	MO	DAY	YR

Average

Maximum

Regulated Flow-gal/day _____

Total Flow-gal/day 56240 6186456,24061,864

Method Used: _____

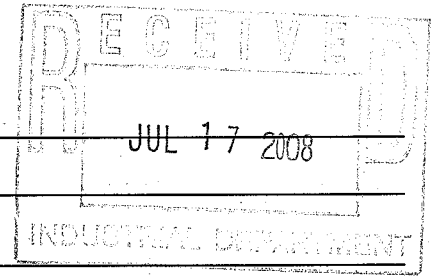
1420811 gals x.95= Divided by 24 _____

PARAMETER		MASS OR CONCENTRATION			# OF SAMPLES	SAMPLE TYPE COMP/GRAB
		MON AVG	MAXIMUM	UNITS		
Cd	Sample Measurement			Mg/l	1	Comp
	Permit Requirement	0.19	✓	Mg/l		
Cu	Sample Measurement	0.118	✓	Mg/l	1	Comp
	Permit Requirement	3.02		Mg/l		
Pb	Sample Measurement			Mg/l	1	Comp
	Permit Requirement	0.54		Mg/l		
Hg	Sample Measurement			Mg/l	1	Comp
	Permit Requirement	0.080		Mg/l		
Ni	Sample Measurement			Mg/l	1	Comp
	Permit Requirement	5.9		Mg/l		
Zn	Sample Measurement	0.191	✓	Mg/l	1	Comp
	Permit Requirement	1.67		Mg/l		
SGT-HEM	Sample Measurement	ND < 5.05	✓	Mg/l	1	Grab
	Permit Requirement			Mg/l		
	Sample Measurement			Mg/l	1	Grab
	Permit Requirement			Mg/l		
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					

Production Rate (if applicable)

PRETREATMENT MONITORING REPORT

Certification of Non-Use if applicable (use additional sheets):



Compliance or non compliance statement with compliance schedule (use additional sheets if necessary) for every

parameter used: Allen Linen is in compliance with the rules and regulations of PVSCExplain Method for preserving samples: Metals samples taken in glass containers and preserved with nitric acid to a ph less than 2

No te: no changes made to the plot plan for this facility

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988

A large, stylized handwritten signature in black ink, appearing to read "Chris Gomez".

Signature of Principal

Executive or Authorized Agent

Chris GomezOperations Manager

Type Name and Title

7/14/08

Date

**INTEGRATED ANALYTICAL LABORATORIES
CHAIN OF CUSTODY**

273 Franklin Rd
Randolph, NJ 07869

Company:	ALLEN LINEN
Address:	407 20th AVE
	PATERSON NJ
Telephone #:	07513
Fax #:	
Project Manager:	
Sampler:	
Project Name:	PVSC DISC
Project Location (State):	
Bottle Order #:	
Quote #:	

REPORTING INFO	
REPORT TO:	HANOVER CONTROLS
Address:	11 WINDSOR WAY EAST HANOVER NJ
Attn:	JOHN
FAX #	
INVOICE TO:	SAME
Address:	
Attn:	
PO #	

SAMPLE INFORMATION

[illegible]

Known Hazard:	Yes or No	Describe:
1. Chemical		
2. Physical		
3. Biological		
4. Ergonomic		
5. Psychological		
6. Other		

Please print legibly and fill out all ambiguities have been resolved.

Signature/Company _____

Relinquished by:

Common Issues

Relinquished by:

Relinquished by:

Relinquished by:

LAB COPIES - WHITE & YELLOW; CLIENT COPY - PINK

Turnaround Time (starts the following day if samples rec'd at lab > 5PM)

*** Lab notification is required for RUSH TAT prior to sample arrival. RUSH TAT IS NOT GUARANTEED WITHOUT LAB APPROVAL. ** RUSH SURCHARGES WILL APPLY IF ABLE TO ACCOMMODATE.**

PHC- MUST CHOOSE

DRO (3-5 day TAT)
QAM025 (5 day TAT min.)

SEE BELOW (under comments section for explanation)

Results needed by:

	Verbal/Fax	72 hr*	1 wk*
2 wk/Std			

[illegible]

Hard Copy	3 wk/Std

Other *call for price

ANALYTICAL PARAMETERS

[illegible]Cooler Temp 3 °C

BOTTLES & PRESERVATIVES

[illegible]

Conc.	Expected:	Low	Med	High
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MDL Req: Old GWQS - 11/05 GWQS - SCC - OTHER (SEE COMMENTS)

Comments: CUL. ZH

DDRO (8015B) - used for: Fuel Oil #2/Home Heating Oil #1 /#2
COAM-025 (OOA-OAM025) - used for: all other fuel oils and unknown contamination

Lab Case #

PAGE: of



ANALYTICAL DATA REPORT

for
Allen Linen
407 20th Avenue
Paterson, NJ 07513

Project Name: PVSC DISC.
Lab Case Number: E08-06511

MDL = METHOD DETECTION LIMIT

Metals

Lab ID: 06511-001

Client ID: PROCESS COMP

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 6/10/2008

Time Sampled: 10:30

Date Analyzed: 6/16/08

Parameter	Result	Q	MDL
Copper	0.118		0.008
Zinc	0.191		0.008

General Analytical

Lab ID: 06511-001

Client ID: PROCESS COMP

Percent Moisture: 100

Date Sampled: 6/10/2008

Time Sampled: 10:30

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	372	2.00	Aqueous-mg/L	6/11/2008 8:00
Total Suspended Solids	76.7	16.7	Aqueous-mg/L	6/11/2008 14:30

General Analytical

Lab ID: 06511-002

Client ID: SG THERM GRAB

Percent Moisture: 100

Date Sampled: 6/10/2008

Time Sampled: 10:30

Parameter	Result	MDL	Matrix-Units	Date Analyzed
TPH- SGT HEM	ND	5.05	Aqueous-mg/L	6/18/2008 13:00

ND = Analyzed for but Not Detected at the MDL

These data have been reviewed and accepted by:

Michael H. Leftin
 Michael H. Leftin, Ph.D.
 Laboratory Director

273 Franklin Road
 Randolph, NJ 07869
 Phone: 973 361 4252
 Fax: 973 989 5288



IAL is a NELAC New Jersey Certified Lab (14751) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Pennsylvania (68-00773) and in the Department of Navy IR QA Program

Allen Linen Process Water Meter Reading

06/01/08 starting water meter reading 83756864 gallons

05/31/08 ending meter reading 85177775 gallons

85177775

83756964

1420811 gallons

1420811 total gallons for the month of June

1420811 divided by 24 days = 59200 gallons per day